

EPO - Munich  
European Patent Office  
D-80298 Munich  
GERMANY

**By Fax and International Recorded Delivery**

By fax to: 00 49 89 2399 4465  
From: 01422 330 090 / +44 1422 330 090  
Page 1 of: 4

Your ref:  
Our ref: RJP/JFB/Y2081  
Date: 28 January 2005

Dear Sirs

**Patent Application:** PCT/GB2003/005318  
**Country:** PCT (Patent Co-operation Treaty)  
**Applicant:** Boots Healthcare International Limited  
**Title:** Measurement and dispensing device for attachment to the cap on a bottle

We write in response to the PCT written opinion dated 30 November 2004, the term for response having been extended by one month.

The examiner accepts that the invention is novel, but does not consider it to be inventive and cites four documents in support of his argument.

We file herewith amended claims pages 10-11, to replace claims pages 10-11 as filed. Claim 1 has been limited to the feature of claim 7 as filed: it now specifies that the socket formation is a close but non-gripping fit on the cap.

D1 describes a measuring device which fits onto the top of a bottle. The device has a cavity of similar shape to the bottle cap allowing the parts to be coupled together. The outer surface of the cap and the inner surface of the cavity have complementary longitudinal grooves allowing them to fit together.

This is different to the device of the present invention in which the socket is a close fit but non-gripping fit onto the cap of the bottle. As mentioned on page 2 of the description, a device which fits to the cap closely enough to assist with the opening of the bottle may compromise child-resistant features of the cap.

Furthermore D1 is silent as regards the nature of the cup portion of the device, i.e. the part which receives and delivers the liquid. However it is shown in Figs. 1 and 2, and it is an "awkward" shape. The shape may be described as a squared-off cylindrical cavity, extending into a squared-off annular cavity (around the bottle cap). In contrast, it is an essential feature of the present invention that the formation for receiving

the medicine is concave. This is so that all of the liquid can be easily removed, using the parts of the mouth (tongue, lips) if necessary. A further advantage is that the concave shape facilitates cleaning. The D1 device is quite unsuitable in this respect.

The examiner says that the use of a concave receiving formation is obvious due to the cap shown in Fig. 3 of D2. However we contest this. The inside of the receiving part of the D2 device has a conical protrusion in the centre (see p. 11, l. 17 of D2). The receiving part is not a concave formation. The third paragraph of page 11 informs the reader that the cap is shaped such that the underside fits to the bottle: the shape of the receiving part is annular – it is entirely the result of the device being adapted to fit the cap. Clearly, the device of D2 is just as poor as the device of D1 in terms of the location of liquid medicine - retained in a narrow lower annular part. It has the same difficulties in terms of the user removing the medicine from the device and, later, washing the device.

The problem of medicine being retained in the delivery device is one of the main problems which the present invention seeks to address. The user would have great difficulty in using the parts of the mouth to remove medicine retained in the bottom of the receiving part of the devices of Figs. D1 and D2.

D3 reveals a unitary device comprising a bottle cap combined with an eye cup. The present invention as now claimed excludes unitary devices, in which the eye cup is integrated with the bottle cap. Integration of an eye cup, or a dosing cup, with a bottle cap would present great difficulties in terms of child resistance.

We therefore submit that claim 1 as now filed involves an inventive step. Since all the other claims depend upon or contain the same features as claim 1, the further claims also show an inventive step and we make no further comments on those.

In the usual way, we defer any amendments to the description until the national phase, given the different national requirements.

We look forward to receiving the IPER.

Yours faithfully  
APPLEYARD LEES

R J Pidgeon

Encs: Replacement claims 1-8  
Form 1038 (x 3)

JC13 Rec'd PCT/PTO 20 APR 2009

CLAIMS

1. A measuring and dispensing device for attachment to the cap on a bottle of liquid medicine, the device comprising on one of its sides a socket formation by means of which it may be releasably attached to the cap, and on another side a concave formation for receiving liquid medicine, wherein the socket formation is a close but non-gripping fit on the cap.
2. A device as claimed in claim 1, wherein the socket formation and the concave formation face in opposite directions.
3. A device as claimed in claim 1 or 2, wherein the device is stable when the socket formation rests on a horizontal surface.
4. A device as claimed in any preceding claim, wherein the concave formation is graduated on its internal surface.
5. A device as claimed in any preceding claim, wherein the internal surface of the concave formation has a surface finish which does not act to retain liquid medicine.
6. A bottle of liquid medicine, having a cap onto which is fitted the socket formation of a measuring and dispensing device as claimed in any preceding claim.

7. A method of dispensing liquid medicine from a bottle as claimed in claim 6, the method including:

5 removing the measuring and dispensing device from the cap of the bottle;

removing the cap of the bottle; and

10 delivering the liquid medicine from the bottle into concave formation of the measuring and dispensing device to the required amount.

15 8. A measuring and dispensing device, or a bottle or method using same, substantially as hereinbefore described with reference to the accompanying drawings.